COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER

PHNL031253 US

As a below named inventor, I h	ereby declare that:			
My residence, post office address and citizenship are as stated next to my name.				
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:				
the specification of which (chec	k only one item below):			
is attached hereto.	•			
☐ was filed as United States a	pplication			
Serial No				
on ,				
and was amended				
on				
_				
was filed as PCT internation	al application			
Number PCT/IB2004/052076				
on 13 October 2004				
and was amended under PCT	Article 19			
on ·			(if applicable).	
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.				
I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).				
I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:				
PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:				
COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119	
Europe	03103915.9	23 October 2003	YES	
	11.0			

Combined Declaration For Patent Application and Power of Attorney (Continued) (includes Reference to PCT International Applications) Attorneys Docket Number PHNL031253 US						
POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)						
Jack E. Haken, Reg. No. 26,902 Michael E. Marion, Reg. No. 32,266 Edward M. Blocker, Reg. No. 30,245				Direct Telepho (name and tele (914)332-0		phone number)
Edwa	FULL NAME OF	FAMILY NAME	· · · · · · · · · · · · · · · · · · ·	FIRST GIVEN NAME		SECOND GIVEN NAME
201	INVENTOR	JOHNSON		Mark		Thomas
	RESIDENCE & CITIZENSHIP	CITY Eindhoven		STATE OR FOREIGN COUNTRY The Netherlands		Great Britain
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Hoistlaan 6		CITY 5656 AA Eindhoven		STATE & ZIP CODE/COUNTRY The Netherlands
FULL NAME OF FAMILY NAME INVENTOR SCHLANGEN			FIRST GIVEN NAME Lucas		SECOND GIVEN NAME Josef Maria	
202	RESIDENCE & CITIZENSHIP	CITY		STATE OR FOREIGN COUNTRY The Netherlands		COUNTRY OF CITIZENSHIP The Netherlands
}	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Holstlaan 6		CITY 5656 AA Eindhoven		STATE & ZIP CODE/COUNTRY The Netherlands
FULL NAME OF FAMILY NAME		FAMILY NAME		FIRST GIVEN NAME		SECOND GIVEN NAME
	INVENTOR BAESJOU			Patrick		John COUNTRY OF CITIZENSHIP
203	RESIDENCE & CITIZENSHIP	Eindhoven		STATE OR FOREIGN COUNTRY The Netherlands		The Netherlands
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Holstlaan 6		5656 AA Eindhoven		STATE & ZIP CODE/COUNTRY The Netherlands
FULL NAME OF INVENTOR		FAMILY NAME ZHOU		FIRST GIVEN NAME Guofu		SECOND GIVEN NAME
204	RESIDENCE & CITIZENSHIP	CITY		STATE OR FOREIGN COUNTRY The Netherlands		COUNTRY OF CITIZENSHIP The Netherlands
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Holstlaan 6		CITY 5656 AA Eindhoven		STATE & ZIP CODE/COUNTRY The Netherlands
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true: and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 if Title 18 of the United states Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.						
SIGNATURE OF INVENTOR 201		SIGNATURE OF INVENTOR 202		SIGNAT	SIGNATURE OF INVENTOR 203	
M. T. Z.						
DATE 23 May 2005		DATE DATE		DATE		
SIGNATURE OF INVENTOR 204						
Goofu Shou						

U.S. DEPARTMENT OF COMMERCE- Patent and Trademarks Office

(July 1994)

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER PHNL031253 US

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COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119	
Europe	03103915.9	23 October 2003	YES	
	l		1	

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Combined Declaration For Patent Application and Power of Attorney (Continued) Attorneys Docket Number PHNL031253 US						
POWE all bus	ER OF ATTORNE iness in the Patent a	Y: As a named inventor and Trademark Office co	r, I hereby appoint onnected therewith	the following attorney(s) and/o . (List name and registration n	umber)	secute this application and transact
Jack	Jack E. Haken, Reg. No. 26,902 Direct Telephone Calls to: (name and telephone number)					
Michael E. Marion, Reg. No. 32,266			(914)332-022			
Edward M. Blocker, Reg. No. 30,245						
	FULL NAME OF FAMILY NAME			FIRST GIVEN NAME Mark		SECOND GIVEN NAME
l	INVENTOR	JOHNSON				Thomas
201	RESIDENCE &	CITY		STATE OR FOREIGN COU	NTRY	COUNTRY OF CITIZENSHIP
l	CITIZENSHIP	Eindhoven		The Netherlands		Great Britain
ſ	POST OFFICE	POST OFFICE ADDRESS		CITY		STATE & ZIP CODE/COUNTRY
1	ADDRESS	Prof. Holstlaan 6		5656 AA Eindhove	en	The Netherlands
	FULL NAME OF	FAMILY NAME		FIRST GIVEN NAME		SECOND GIVEN NAME
	INVENTOR	SCHLANGEN		Lucas		Josef Maria
202	RESIDENCE &	CITY		STATE OR FOREIGN COU	NTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP .	Eindhoven		The Netherlands		The Netherlands
l	POST OFFICE	POST OFFICE ADDR	ESS	CITY		STATE & ZIP CODE/COUNTRY
	ADDRESS	Prof. Holstlaan 6		5656 AA Eindhoven		The Netherlands
	FULL NAME OF	NAME OF FAMILY NAME		FIRST GIVEN NAME		SECOND GIVEN NAME
	INVENTOR	BAESJOU		Patrick		John
203	RESIDENCE & CITY		STATE OR FOREIGN COUNTRY		COUNTRY OF CITIZENSHIP	
	CITIZENSHIP	Eindhoven		The Netherlands		The Netherlands
Ì	POST OFFICE			5656 AA Eindhoven		STATE & ZIP CODE/COUNTRY
	ADDRESS					The Netherlands
	FULL NAME OF	FAMILY NAME		FIRST GIVEN NAME		SECOND GIVEN NAME
	INVENTOR	ZHOU		Guofu		
204	RESIDENCE &	CITY		STATE OR FOREIGN COU	NTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Eindhoven		The Netherlands		The Netherlands
	POST OFFICE	POST OFFICE ADDR	ESS	CITY		STATE & ZIP CODE/COUNTRY
	ADDRESS	Prof. Holstlaan 6		5656 AA Eindhoven		The Netherlands
true: a	nd further that these	e statements were made der section 1001 if Title	with the knowledg	e that willful false statements	and the like so m	formation and belief are believed to be lade are punishable by fine or its may jeopardize the validity of the
SIGNATURE OF INVENTOR 201 SIGNATURE OF INVENTOR 202 SIGNATURE OF INVENTOR 203				URE OF INVENTOR 203		
		W. S. L.			Re	
		100	13000		<i>M</i> -	
DATE DATE 2/ Mo		DATE 2/ Mov	DATE		24 May 2005	
24 May 2005 24 May 2005 SIGNATURE OF INVENTOR 204				24 1 EQ 2000		

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(July 1994)

DATE